(b) whether Government is aware that records clearly show that instead of operating on patient's small artery, doctor blocked his main artery which supplies blood to the heart;

(c) if so, whether any action has been taken against the careless doctor and inquiry instituted; and

(d) if so, the details of case and what compensation has been paid to the parents of the poor boy?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (d) The information is being collected and will be laid on the table of the House.

Autonomy of AIIMS

†1233. SHRI JANESHWAR MISHRA: Will the MINISTER OF HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the autonomy of AIIMS has been affected and its functioning too has been seriously affected due to the dispute between him and the director, since long;

(b) if so, whether it is also a fact that the work related to appointment, suspension and removal from a post in AIIMS are being done on the basis of lobbying;

(c) if so, whether Government would take any effective steps to end the chaos prevailing in AIIMS; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (d) The All Indian Institute of Medical Sciences (AIIMS), is an Institute constituted by All India Institute of Medical Sciences, Act, 1956. The Act, Rules and Regulations framed thereunder clearly stipulate the powers and responsibility of various functionaries. The Institute Body, Governing Body, President of the Institute and Director are required to function within the powers as envisaged under the Act, Rules & Regulations. Actions relating to appointment, removal and suspension of faculty taken by President, AIIMS are within his delegated power.

Untoward incidents at Government Hospitals

†1234. PROF. RAM DEO BHANDARY: Will the MINISTER OF HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether untoward incidents like man handling and thrashing over treatment of patients at the Government hospitals have gone up;

(b) if so, the details of the incidents occurred at the Government hospitals during past one year and the reasons therefor;

(c) the details of doctors' strikes over these incidents and the number of patient's deaths during this period State-wise;

(d) whether the court has passed strictures thereon and if so, the details thereof; and

(e) the steps being taken by Government for streamlining management and treatment in hospitals?

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† Original notice of the question was received in Hindi.

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (e) In so far as Central Government Hospitals in Delhi are concerned, there has been no serious case of manhandling and thrashing of Doctors by patient's relatives over treatment issues during past one year.

Unwillingness to treat patients by hospitals under CGHS panel

1235. SHRIMATI KANIMOZHI: Will the MINISTER OF HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether many hospitals on CGHS panel are not willing to treat patients referred to by CGHS;

(b) if so, the reasons therefor; and

(c) the action taken to ensure compliance by those hospitals?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (c) CGHS has not received any report that private empanelled hospitals, which have signed Memorandum of Agreement (MOA) with the CGHS, are unwilling to treat patients referred to them by the CGHS.

India to cross China as most populous country

1236. SHRI SANJAY RAUT: Will the MINISTER OF HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether at the current rate India is expected to cross China as the most populpus country by 2045;

(b) if so, whether any comprehensive action plan has been worked out to achieve the target of zero growth;

(c) if so, the details thereof; and

(d) the time by when the zero growth target is likely to be achieved thereunder?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (c) As per Technical Group on Population Projection Report, May, 2006, at the current rate, India's population is expected to exceed that of China before 2030 to become the most populous country in the world. However, United Nation's population projection has estimated that India's population is likely to cross China in the year 2025.

Population stabilization is one of the objectives of National Rural Health Mission (NRHM) as well as Reproductive and Child Health Programme (RCH-II). The approach of Government is to provide quality health services in remote rural areas along with a wide range of contraceptive choices to meet the unmet demands for reproductive health services which include delivery, safe abortions, treatment of reproductive tract infections and family planning services. The RCH-II intends to imrpove the performance of family welfare services by reducing total fertility rate, maternal and infant morbidity and mortality, and unwanted pregnancies. Under NRHM & RCH-II, the Programme Implementation Plans of States *inter alia* include the action plan for family planning activities.

(d) As estimated by Technical Group on Population Projection, the total fertility rate would reach replacemet level fertility of 2.1 only by the year 2021. The population stabilization